

JAN 04 2005

PTO/SB/22 (12-04)  
WCSR Form (12/2004)

<b>PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a) FY 2005</b> (Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818)).		Docket No. : A202 1050.1
Serial Number	10/068,688	Filed February 6, 2002
In re Application of LIBBY et al.		
For: MULTI-TASK WINDOW		
Group Art Unit:	2673	Examiner: Nguyen, Jimmy H.

This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing reply in the above identified application.

The requested extension and fee are as follows (check time period desired and enter the appropriate fee below):

	Fee	Small Entity	
<input type="checkbox"/> One month (37 CFR 1.17(a)(1))	\$ 120	\$ 60	\$ _____
<input checked="" type="checkbox"/> Two months (37 CFR 1.17(a)(2))	\$ 450	\$ 225	\$ <u>450.00</u>
<input checked="" type="checkbox"/> Minus one-month extension already paid (\$110.00) equals			\$ <u>340.00</u>
<input type="checkbox"/> Three months (37 CFR 1.17(a)(3))	\$1020	\$ 510	\$ _____
<input type="checkbox"/> Four months (37 CFR 1.17(a)(4))	\$1590	\$ 795	\$ _____
<input type="checkbox"/> Five months (37 CFR 1.17(a)(5))	\$2160	\$ 1080	\$ _____

☐ Applicant claims small entity status. See 37 CFR 1.27.

☒ The Commissioner is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number 09-0528

I have enclosed a duplicate copy of this sheet.

I am the ☐ applicant/inventor.

☐ assignee of record of the entire interest. See 37 CFR 3.71.  
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/86).

☐ attorney or agent of record.

☒ attorney or agent under 37 CFR 1.34(a).

Registration number if acting under 37 CFR 1.34(a) 39,893

*Nanda K. Alapati*  
Nanda K. Alapati

January 4, 2005  
Date

Telephone Number: 703-394-2216

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below

☐ \_\_\_\_\_ forms are submitted.

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